

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 50%;">Attorney Docket No.</td><td>529872000112</td></tr><tr><td>First Inventor</td><td>Tze-Bin CHOU</td></tr><tr><td>Title</td><td>DROSOPHILA CLIPPED FRT (CFRT) CHROMOSOME INSENSITIVE TO P TRANSPOSASE, GENERATING METHOD THEREOF, AND APPLICATION THEREOF</td></tr><tr><td>Express Mail Label No.</td><td>EL961005947US</td></tr></table>	Attorney Docket No.	529872000112	First Inventor	Tze-Bin CHOU	Title	DROSOPHILA CLIPPED FRT (CFRT) CHROMOSOME INSENSITIVE TO P TRANSPOSASE, GENERATING METHOD THEREOF, AND APPLICATION THEREOF	Express Mail Label No.	EL961005947US														
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<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>		<b>ADDRESS TO:</b> MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450																						
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18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: <table style="width: 100%;"><tr><td><input type="checkbox"/> Continuation</td><td><input checked="" type="checkbox"/> Divisional</td><td><input type="checkbox"/> Continuation-in-part (CIP)</td><td>of prior application No.: <b>10/044,423</b></td></tr><tr><td colspan="3">Prior application information: Examiner <b>M. Zeman</b></td><td>Art Unit: <b>1631</b></td></tr></table> <b>For CONTINUATION OR DIVISIONAL APPS only:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			<input type="checkbox"/> Continuation	<input checked="" type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part (CIP)	of prior application No.: <b>10/044,423</b>	Prior application information: Examiner <b>M. Zeman</b>			Art Unit: <b>1631</b>														
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<b>19. CORRESPONDENCE ADDRESS</b>																								
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Name (Print/Type) <b>Karen R. Zachow, Ph.D.</b>		Registration No. (Attorney/Agent) <b>46,332</b>																						
Signature <i>Karen R. Zachow</i>		Date <b>October 20, 2003</b>																						

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL961005947US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 10-20-03 Signature: *[Signature]* (Michael Boyd)

<b>FEE TRANSMITTAL for FY 2004</b>				<b>Complete if Known</b>																																																																																																																																																																																					
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<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.				<b>3. 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<b>SUBMITTED BY</b> Name (Print/Type) Karen R. Zachow, Ph.D. Signature <i>Karen R. Zachow</i>				(Complete (if applicable)) Registration No. (Attorney/Agent) 46,332 Telephone (858) 720-5191 Date October 20, 2003																																																																																																																																																																																					